

220517

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limb

Request to Cancel Class C Taxi Certificate

Hazeltime Jackson

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NOV 30 2009

ORS
T.T.W.W.W

(Please type or print)

Submitted by: Hazeltime Jackson

DOCKET

NUMBER: 2000 - 309 - T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

Address: 458 GUILDFORD CR
FLORENCE S.C. 29501

Telephone: 843-667-6438

Fax: 843-667-8524

Other:

Email:

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

☐ Application - Class A/A Restricted☐ Application - Class C Taxi☐ Application - Class C Charter☐ Application - Class C Charter Bus☐ Application - Class C Non-Emergency☐ Application - Class C Stretcher Van☐ Application - Class E Household Goods☐ Application - Class E Hazardous Waste☐ Application☐ Request for Extension to Comply with Order☐ Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded☒ Request for Cancellation of Certificate☐ Request for Suspension☐ Request for Reinstatement

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PSC SC
DOCKETING DEPT.☐ Request for Name Change on Certificate☐ Request to Amend Scope of Authority☐ Request to Amend Tariff (rate increase, etc.)☐ Request to Amend Passenger Limit☐ Request☐ Exhibit☐ Late-Filed Exhibit☐ Letter☐ Proposed Order☐ Publisher's Affidavit☐ Reservation Letter☐ Response☐ Return to Petition☐ Other:

COPY

Posted: 10/30

Dept: SA

Date: 11/30/09

Time: 3:55

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

Print Form

Reset Form

Request for Cancellation of Certificate

File the original with:

Public Service Commission of South Carolina
Docketing Department
Motor Carrier Matters
P.O. Box 11649
Columbia, S.C. 29211
(803) 896-5100
FAX (803) 896-5199

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ORS
T.T.W./W/V

Mail or fax a copy to:

S.C. Office of Regulatory Staff
Transportation Department
1401 Main Street, Suite 900
Columbia, S.C. 29201
(803) 737-0578
FAX (803) 737-0815

DATE: _____

Please consider this a request to cancel my:

- ☒ Class C Taxi Certificate ☐ Class A Restricted Certificate
☐ Class C Charter Certificate
☐ Class C Charter Bus Certificate
☐ Non-Emergency Certificate
☐ Class E Household Goods Certificate
☐ Class E Hazardous Wastes Certificate

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PSC SC
DOCKETING DEPT.My Certificate Number is 6964-C

Hazeltine Jackson
(Name of Company)

DBA

N/A
(If applicable)

*458 Guilford Cir
(Street Address)

*
(Mailing Address, if different from Street Address)

*Horse SC 29501
(City, State, Zip Code)

*
(City, State, Zip Code)

*843 669-6438
(Telephone Number)

*Hazeltine Jackson
(Signature)

*OWNER
(Title) owner, pres., etc